

**DEPARTMENT OF  
PUBLIC HEALTH AND HUMAN SERVICES**



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DATE: June 13, 2008

TO: Cindy Eleson, Executive Director  
Duane Smith, President Board of Directors, Richland Opportunities Inc.

FROM: Cindy Frederickson, Quality Improvement Specialist

RE: Comprehensive Evaluation, Quality Assurance Review FY 2008

Please find attached the QA Review report for Richland Opportunities Incorporated. The format is different than in prior years. The table shows the areas of review with any pertinent findings noted in the comment sections, followed-up with quality assurance observation sheets (QAOS) and appendices.

This review encompasses the contracted services of residential habilitation (group home and supported living), day habilitation and community supports. The one follow-up issue, QAOS # 5, identified during the review required a plan of correction and the plan is accepted. Your agency has many strengths, not the least of which is your current employees, your community and the other agencies (APS, DDP, Licensing, Fire Marshal, etc.) with whom you interact.

Your agency continues to confirm its commitment to the consumers and staff. The people you serve and their families are happy and comfortable with the supports you offer. You should be proud of the standard of excellence you have created.

I am privileged to monitor your program and to be counted as part of your service family. As always, if I can be of any assistance, please do not hesitate to contact me.

**QUALITY ASSURANCE REVIEW NARRATIVE MILK RIVER INCORPORATED**

## **SCOPE OF REVIEW**

The purpose of the Annual Quality Assurance Review by the Developmental Disabilities Program (DDP) is to serve as a comprehensive review of individual planning, adherence to administrative rules, federal regulations, waiver assurances, and compliance with Richland Opportunities Incorporated's (ROI) contract with Department of Public Health and Human Services.

An on-site quality assurance review of MRI was conducted April 30, May 1, 2 of 2008. The contracted services reviewed; residential habilitation (group home and supported living), day habilitation and community supports. Information was gathered through observation, interviews with staff and individuals supported, review of documentation, and a desk review of data collected through out the review period including quarterly reports. Sandra Carpenter, QIS, Region 1 Glasgow, assisted with the review.

## **GENERAL AREAS**

- Individuals and family/guardian surveys are overall very complimentary to services.
- Consumers supported by ROI are engaged in their daily lives and making choices that are important to them.
- You continue to find reasons to celebrate: Holidays, Birthdays, and the 2<sup>nd</sup> annual potluck and white elephant exchange.
- ROI Policy and Procedure Manuals were reviewed and found to be in compliance with DDP requirements and directives.
- Internal communication throughout the organization is outstanding!
- Peer and Svarre Group Homes are deficiency free. QAOS#4
- Transitional Living Complex has had a facelift, the apartments are freshly painted

**Consumer Sample/**Random sampling was the process used to select consumers for the Quality Assurance Review. Consumers were selected from each of ROI's service categories: Peer and Svarre Group Homes, Jensen Activity Center, Transitional Supported Living, Supported Living/Supported Employment, in addition all 4 individuals receiving Community Supports were reviewed.

## **RESIDENTIAL HABILITATION SERVICES REVIEW**

- Svarre Group Home (SGH) is home to 8 individuals and Peer Group Home (PGH) is home to 6 individuals. Both homes offer clean, safe and healthy environments. Individuals' bedrooms are decorated according to individual taste and preferences.
- ROI's Transitional Living Complex (TLC) provides apartments for 7 individuals. There is an additional living space for the on-site manager.
- Several individuals own their homes or live in Apartment Complexes within the Community.
- "Staff ratios" (staff available onsite) are clearly defined by the consumers' Individual Cost Plan and meeting individual health, safety, quality of life issues.

**Health and Safety**

- All residences had a homey and relaxed atmosphere; consumers were comfortable, happy and proud to show off their bedrooms, apartments or homes.
- All individuals interviewed were able to identify who they would talk to if they had an issue or if they wanted something different in their lives.
- An individual who previously worked for ROI was rehired without a Department of Justice Criminal Background Check being conducted prior to re-employment with ROI. A safety concern exists due to lack of criminal background checks for returning employees. QAOS#5

**Service Planning & Delivery**

- Data collection forms for Social Skills training ie., Coping with anger, Coping with criticism, Job skills and Building Friendships are user friendly. Emotion Icons in the front of each program book, assist the consumers with identification of their feelings, during training. Consumers initial or provide their signatures to verify the actions/ objectives were completed as prescribed in their PSP's. Individuals receiving Supported Living Services and Community Supports have a Food Groups List for their use when grocery shopping. The List identifies foods to "choose" and foods to "avoid". The individuals assisted the staff in creating the list. QAOS#1
- Peer and Svarre Group Home communication books are exemplary tools which provide staff a daily overview of each consumer supported within residential and work/day services. Each consumer section contains medication and prn protocols, reactive strategies, daily log notes, actions/objectives from the individual's PSP/IP, and daily Health Care Checklists that are filled out by both residential and work/day staff. QAOS#2
- ROI has developed an effective, user friendly documentation system to keep records of services provided to consumers under Montana's HCBS Waiver. Each individual receiving HCBS's has established staff hours per week and day for work/day, staff hours per week and day for residential, and hours per month for Supported Employment. Time studies were completed for each consumer's tasks and documentation is recorded 8am - 4pm during Day Program, if the person is receiving Group Home services documentation occurs 6am-8am, 4pm-10pm, 10pm -6am and weekends 6am- 10pm. Individuals receiving SL and Community Supports have identified monthly hours. Tasks are clearly identified for each person and include Reactive strategies, Actions/objectives, Outings, Medical appointment etc. QAOS#3
- Daily opportunities exist for participation in a variety of leisure activities for GH residents. During last year's Quality Assurance Review lack of leisure activities and choice of activities was noted as a deficit area. Peer and Svarre Group Home staff and the consumers have developed personal leisure activity lists based upon participant choice. QAOS#6

**Work/Day/Community Employment:**

- ROI provides employment and training activities to 31 consumers. Individuals are supported in Community placement, Senior Day Program, Intensive Day Program, Job Crews, and Jensen Activity Center. ROI in house work activities focus on paper and box recycling.

- For specific information regarding Health and Safety and Service Planning and Delivery please refer to areas above under Residential Services as they apply agency wide.

**Community Supports:**

- Three of the four consumers receiving Community Supports are purchasing their homes and they are proud of this accomplishment.
- ROI has historically been a strong champion of the rights of people served, and this review revealed nothing to the contrary.
- It is evident that ROI staff provides exemplary emotionally responsible care giving and support to the individuals entrusted to the agency. The staff focus is the individuals' enhanced independence and quality of life. Individuals are supported with dignity and respect as they make choices and decisions regarding their lives.
- For specific information regarding Health and Safety and Service Planning and Delivery please refer to areas above under Residential Services as they apply agency wide.

**Conclusion:**

I want to thank all ROI staff for the cooperation I received during this review process. Above all else it is the ROI staffs' commitment that makes the organization function and provide the quality of service that expands daily. ROI has responded to each QAOS sheet with a plan of correction. All findings are considered closed as a result of the responses from ROI.

Respectfully,

Cindy Frederickson, Quality Improvement Specialist

**Attachments:**

Quality Observation Assurance Sheets numbered 1- 6  
Comprehensive Evaluation

**cc:**

Dain Christianson, Region 1 Regional Manager  
Tim Plaska, Bureau Chief, DDP  
John Zeeck, Quality Assurance Specialist, DDP  
Perry Jones, Waiver Specialist, DDP  
DDP Contract File

Comprehensive Evaluation  
6/20/2008

**Agency:** Richland Opportunities, Inc.  
**Evaluators:** Frederickson & Carpenter

DESK REVIEW:	Appendix or QAOS
<b>Accreditation:</b> Accreditation is no longer required by the state contract.	
<b>Significant Events from the Agency:</b> Provided by Executive Director, Cindy Eleson <ul style="list-style-type: none"> <li>• Individual and family/guardian surveys are overall very complimentary to services.</li> <li>• The people that we have the pleasure to serve are overall happy with their support and ROI takes pride in this.</li> <li>• ROI has assisted in the vocational plans of three students from two different school systems this past year. Because of this relationship, ROI was chosen to provide vocational and SL services by one student who is graduating in May.</li> <li>• In February, ROI thespians put on mini-plays for the community after practicing for one month. Community attendance was about 100 people.</li> <li>• Special Olympics basketball team took 1st place again this year. After taking a year sabbatical, the Special Olympics' field and track participated in the district meet and plans have been made to attend the state meet.</li> <li>• Lori Johnson, long term employee of ROI received the career achievement award at the DD conference this year.</li> <li>• The workshop has enclosed a garage bay in order to assist in temperature control in bringing the recyclable materials into the workshop.</li> <li>• ROI has held it's own in staffing. We have had a high turnover in staff and yet, we have remained staffed through the dedication of our employees!</li> <li>• Staff training has been a priority and all staff have completed Tier 1 of CDS and 1st Aid/CPR, with the exception of our most recent hires.</li> <li>• ROI contracts with Kerry O'Dell to provide maintenance work on our property. His work is greatly appreciated!</li> <li>• ROI has nine committed board members who go above and beyond the monthly meetings.</li> <li>• There have been many changes in the developmental disabilities system, and we are still standing and working as a team to provide support.</li> <li>• We are working diligently on SURS compliance!</li> </ul>	
<b>Agency Internal Communications Systems:</b> Richland Opportunities, Inc. has excellent internal communications systems. Monthly meetings are held at each service site. ROI's management structure enables clear communications across the entire agency: Visible Executive Director, Developmental Disabilities Coordinator responsible for Residential Hab Services and Day Services, Site specific Assistant Managers, Quality Assurance Coordinator who is responsible for Incident Management. Peer and Svarre Group Home communication books are exemplary tools which provide staff a daily overview of each consumer supported within residential and work/day services. Each consumer section contains medication prn protocols , reactive strategies, daily log notes, actions/objectives from the individual's PSP/IP, and daily Health Care Checklists that are filled out by both residential and work/day staff. ROI publishes a quarterly newsletter for all stakeholders.	QAOS#2
<b>Policies and Administrative (DDP) Directives</b> ROI Policy and Procedure Manuals were reviewed and found to be in compliance with DDP requirements and directives.	

# Comprehensive Evaluation

6/20/2008

Agency: ROI  
Evaluators: Frederickson & Carpenter

DESK REVIEW:	Appendix or QAOS
<p><b>Fiscal (audits, cost plans, invoices):</b></p> <p>A DDP Rates Analysis was completed by the Fiscal Bureau for the year ending June 30, 2007. Only minor issues were noted in the report: Increase ROI's surety bond, and A client's parents purchase items for their relative from their own funds when he is home visiting. The client writes the parents a check to reimburse the parents, receipts are needed from the parents due to ROI being the client's rep-payee. All recommendations received an acceptable provider response. ROI is making money on Day Services and Supported Living , but is losing money on Group Home Services. Agency total net assets showed an increase for FY 2007 and ROI used the increase to raise direct staff pay \$1.00 per hour. MRI presented the agency's Independent Auditor's Report for the year ending 6/ 2007. No recommendations were noted.</p>	
<p><b>Licensing:</b></p> <p>Licensing reports for Svarre and Peer Group Homes state the GH's were found to be deficiency free.</p>	QAOS#4

# Comprehensive Evaluation

6/20/2008

Agency: ROI

Evaluators: Frederickson & Carpenter

DESK REVIEW:	Appendix or QAOS
<p><b>Quality Assurance Observation Sheets: (trends from past year)</b></p> <p>There have been no negative quality assurance observation sheets for ROI in the past year.</p> <p>During last year's Quality Assurance Review lack of leisure activities and choice of activities was noted as a deficit area. Peer and Svarre Group Home staff and the consumers have developed personal leisure activity lists based upon participant choice.</p> <p>There were no recurring issues from the previous year's QA Review.</p>	QAOS#6
<p><b>Medication Errors: (trending from past year)</b></p> <p>The number of medication errors for the past year is 21. The errors include late, missed, dropped medications or an error by the pharmacy. No adverse reactions have occurred due to the medication errors. The majority of medication errors have occurred at Svarre Group Home (SGH). Administrative interventions included Medication Training for all staff at Svarre GH, Quality Assurance Coordinator has reviewed medication administration process during shifts at SVH and staff corrective actions were initiated. The Incident Management Committee reviewed all med errors, ROI's policy and procedure for med errors was followed. Medication administration sheets were orderly, easy to read and organized throughout the agency. Several individuals who reside at Transitional Living Complex, order their own medications from the pharmacy, independently take their medications and initial the medication administration record.</p>	
<p><b>Incident Management: (summary trends, steps to address trends, investigation summaries)</b></p> <p>Critical incidents this year include: 3 hospitalizations: 1 for MH issues (consumer stabilized and medications were changed) 2 following a doctor's appointment (testing ordered by doctor), 3 client to client incidents (female and male consumers counseled regarding telling the truth), 1 incident of physical aggression (restraining order obtained for consumer's protection from relative), 1 possible credit card theft of consumer (police involved and did follow up with consumer, consumer's computer password etc, changed) 1 consumer not provided personal hygiene care (employee corrective action).</p> <p>All incidents were investigated by ROI's Incident Management Coordinator, reports were thorough and submitted in a timely manner to DDP. As noted above all recommendations were implemented to ensure the individuals' health and safety. ROI's Board of Directors reviews incidents at their regularly scheduled meeting.</p> <p>□</p>	

Comprehensive Evaluation  
6/20/2008

Agency: ROI

Evaluators: Frederickson & Carpenter

Staff Related:										Appendix or QAOS
<b>Evidence Found of Orientation Training (mark 'yes' if present, 'no' if not present)</b>										
staff initials	cy	np	jj							
yes/no	yes	yes	yes							
<b>Note where evidence found:</b> personnel files at ROI's main office										
<b>Evidence Found DDCPT or equivalent:</b>										
staff initials	cy	np	jj							
yes/no		yes/ rehire								
<b>Note where evidence found:</b> personnel files at ROI's main office										
<b>Evidence of Criminal Background Checks:</b>										
staff initials	cy	np	jj							
yes/no	yes	no	yes							
<b>Note where evidence found:</b> personnell files, staff training records, agency employment application										
<b>Evidence of Staff Survey:</b>										
staff initials										
yes/no										
<b>Note where evidence found:</b>										
<b>Comments: (regarding staff hiring, screening, training, supervision)</b> An individual who previously worked for ROI was rehired without a Department of Justice Criminal Background Check being conducted prior to re-employment with ROI. Staff survey 9/2007.										QAOS#5



Comprehensive Evaluation  
6/20/2008

Agency: ROI

Evaluators: Frederickson & Carpenter

Staff Related:								Appendix or QAOS
<b>Evidence Found of Staff Training: (mark 'X' if present, 'no' if not present)</b>								
<b>staff initials</b>	mk	km	ct					
1st aid/CPR	x	x	x					
Abuse Prevention	x	x	x					
Client Rights	x	x	x					
Incident Reporting	x	x	x					
Confidentiality	x	x	x					
IP/PSP Process	x	x	x					
CDS complete w/in 6 months of hire date?	x	x	x					
Medication Cert	x	x	x					
<b>Note where evidence found:</b> personnel files at ROI main office								
<b>Comments:</b> ROI is committed to training of and for the Direct Support Professional.								

# Comprehensive Evaluation

6/20/2008

Agency: ROI

Evaluators: Frederickson & Carpenter

Note Site Reviewed:

IP Checklist: check if evidenced										Appendix or QAOS
Consumer Initials										
<b>On Site</b>	Consumer/Family Survey	Nov-07	Nov-07	Nov-07	Nov-07					
	PSP/IP Doc Avail to all Staff	x	x	x	x					
	IPP/Actions Implemented	x	x	x	x					
	Data for IPP/Actions	x	x	x	x					
	Data Internally Monitored	x	x	x	x					
	Self Medication Objective	x	x	x	x					
	Consumer informed of grievance procedure	x	x	x	x					
	SL consumer choice of SL staff	x	x	x	x					
	Rights Restrictions	x	x	x	x					
<b>CMINT</b>	PSP/IP Checklist	x	x	x	x					
	PSP/IP Annually?	x	x	x	x					
	Individual Needs Addressed?	x	x	x	x					
	Assessment Based?	x	x	x	x					
	Quarterly Reports?	x	x	x	x					
	Incident Reports Addressed?	x	x	x	x					
	Behavioral Supports Addressed?	x	x	x	x					
	Functional Analysis Needed?	na	na	na	na					
Free from Aversive Procedures?	x	x	x	x						
<b>Comments: (regarding service planning and delivery)</b> <p>QAOS#3-ROI has developed an effective, user friendly documentation system to keep records of services provided to consumers under Montana's HCBS Waiver. Each individual receiving HCBS's has established staff hours per week and day for work/day, staff hours per week and day for residential, and hours per month for Supported Employment. Time studies were completed for each consumer's tasks and documentation is recorded 8am - 4pm during Day Program, if the person is receiving Group Home services documentation occurs 6am-8am, 4pm-10pm, 10pm -6am and weekends 6am- 10pm. Individuals receiving SL and Community Supports have identified monthly hours. Tasks are clearly identified for each person and include Reactive strategies, Actions/objectives, Outings, Medical appointment etc.</p> <p>QAOS#1-Data collection forms for Social Skills training ie., Coping with anger, Coping with criticism, Job skills and Building Friendships are user friendly. Emotion Icons in the front of each program book, assist the consumers with identification of their feelings, during training. Consumers initial or provide their signatures to verify the actions/ objectives were completed as prescribed in their PSP's. Individuals receiving Supported Living Services and Community Supports have a Food Groups List for their use when grocery shopping. The List identifies foods to "choose" and foods to "avoid". The individuals assisted the staff in creating the list.</p> <p>SL- Consumers do not participate in the SL hiring process. If a consumer has a complaint about a SL staff, Roi makes accommodations to change out staff.</p>										

Comprehensive Evaluation  
6/20/2008

Agency: ROI

Evaluators: Frederickson & Carpenter

Make note of site reviewed

Residential Site Checklist: check if evidenced or mark data as appropriate

Appendix  
or QAOS

Site Name	TLC	SGH	PGH					
<b>H</b> <b>e</b> <b>a</b> <b>l</b> <b>t</b> <b>h</b> <b>S</b> <b>a</b> <b>f</b> <b>e</b> <b>t</b> <b>y</b>	Bathing procedures posted	na	x	x				
	Clean/Sanitary Environment	x	x	x				
	Egress	x	x	x				
	Hot Water Temps	105/110	110/18	110/115				
	Emergency Assistance	x	x	x				
	Fire Extinguishers/smoke Detectors	x	x	x				
	1st Aid/CPR Supplies Accessible/Available	x	x	x				
	PRN Medications	x	x	x				
	Medication Procedures	x	x	x				
	Medication Locked Storage	na	x	x				
	Medication Administration Records	x	x	x				
	Staff Ratios or ICP staffing	1staff	3staff	3staff				
	Awake Overnight Staff	na	x	x				
	Adequate Supplies	x	x	x				
	Storage of Supplies	x	x	x				
Free from aversive procedures?	x	x	x					
<b>D</b> <b>a</b> <b>i</b> <b>l</b> <b>y</b>	Weekly integrated activities	na	x	x				
	House or Site Rules							
	Opp for choice, self determination	x	x	x				
	Meal Prep, Mealtime	x	x	x				
	Engagement in Daily Life	x	x	x				
	Participation in Daily Living Skills	x	x	x				
	Daily Leisure Opportunities	x	x	x				
	Staff Trained in Individual Specifics	x	x	x				
<b>Comments:</b>								

Eval Date: 4/30 ,5/1 2008

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

[illegible]

Eval Date: 4/30, 5/1 2008

Frederickson &amp; Carpenter

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer:	Hours per ICP:	Day Hab hrs 10wkly, Res Hab SL 1 to 30 hrs mo				
Actions per PSP		Evidence support provided consistently?				
Assistance with financial needs		has her own checkbook and usually balances herself				
Assistance with communication with family		calls every other mo				
1x wkly will research vacation options on the computer		yes				
obtain a new neck brace		yes, order to be obtain at annual physical 5/2008				
Exercise 3 x wkly at JAC		yes				
obtain PT Eval		yes, obtain order at annual physical 5/2008				
Assistance with grocery shopping, medical appts.,fridge checks		yes				
4x mo will attend retirement activities		yes				
2x mo word phrases for the telephone		yes				
2 x mo will participate in Coping with Criticism and Friendship training		yes      QAOS#1				
		Happy individual who enjoys working and her independence.				
		Orders her own meds and self administers them				

[illegible]

Frederickson &amp; Carpenter

consumer:	Hours per ICP:	Day Hab 32.5 hrs wkly	Res Hab 68.8 hrs wkly				
Actions per PSP			Evidence support provided consistently?				
Host Disney Party			completed party was outstanding				
Academic skills daily			yes				
2x mo write letter or call Mom JAC/GH			family very involved				
prepare snack daily at JAC and GH			consistently completed daily				
exercise 2x wkly, daily when able			yes				
complete chore list daily at GH			yes				
attend church 3xmo			weather permitting this actions is completed				
complete critical hygiene tasks			yes				
			Leisure /Recreation activities are specific to 's likes				
			QAOS#1,2,3,6				

[illegible]

Provider: ROI Community Supports  
Eval Date: 4/30/2008 Frederickson & Carpenter

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff were able to accurately describe the supports necessary for the individual.

consumer:	Hours per ICP:	Res Hab 1 to 8 hrs mo	Supported Employment 1 to 4 hrs mo			
IP Goals/Objectives		Evidence support provided consistently?				
reconcile check register to bank statement 1x's mo.		yes				
Mo. ---- will give his CS staff a calendar that shows he took his meds		yes				
1x wkly ---- will pay his bills with CS staff		yes				
1x mo. Tom will contact ----'s work site SHCC follow up with ----		yes				
Every 2 weeks ---- will make a copy of his work schedule and pay stubs and give them to his CS staff		yes				
Will attend scheduled medical appointments with CS staff		yes				
End of each mo ---- will mail pay stubs to SS with assistance from CS Staff		yes				
1x mo ---- will perform a Life Line Systems check in CS staff presence		yes				
1x mo CS staff will ask ---- if he has filled his medication		yes				
1x at least every 60 days staff will count his medication and compare to his documentation of taking his meds		yes				
		Met with ---'s trainer she is very knowledgeable regarding ---.				
		Documentation reviewed nicely organized and consistently services were delivered				
		SS owns his home. He is making decisions regarding his home just as you and I do.				

[illegible]

Eval Date: 5/1/2008 Frederickson & Carpenter

[illegible]



Eval Date: Frederickson & Carpenter

consumer:	Hours per ICP:	Res Hab 18 to 24 hours mo, Supported Employment 1 to 4 hrs mo			
Actions per IP	1/18/2007	PSP scheduled 5/28/08	Evidence support provided consistently?		
1x mo job coach will meet with employer			yes		
2x mo ----- will review low cholesterol info with CS staff			yes		
----- will go on outings as scheduled with CS staff			yes		
1x mo ----- will have a safety review with CS Staff			yes		
Assistance with all medical needs			yes		
Assistance with financial needs as scheduled			yes		
			Met with ---'s Support staff she is knowledgeable regarding ---'s service expectations. --- is encouraged to make informed choices and exert self determination in her daily life. --- own her home... a great success!		

[illegible]

Eval Date: Frederickson & Carpenter

consumer:	Hours per ICP:	Day Hab 14 hrs wkly,	Supported Employment 1 to 4 hrs mo			
Actions per IP 2/26/2008		Evidence support provided consistently?				
JAC 1xwkly will complete academic skills		yes				
1x mo job coach will check with -----'s employer and follow up with -----		yes				
JAC 1x wkl 15 min on computer skills		yes				
ROI will provide transportation to medical appointments		yes				
JAC 1x mo ----- will attend the Friendship series training		yes				
		--- is very happy with the choices she is making for her life.				
		Staff are very fond of --- and support her in her position at Pamida.				
		She has her own email account and enjoys chatting with friends.				

[illegible]